

**TOWN OF LUNENBURG  
HEALTH INSURANCE RATES  
7/1/15 @25%**

PLAN		TOTAL PREMIUM	EMPLOYEE AMOUNT	26 PAY	22 PAY	21 PAY	RETIREE AMOUNT	Town Share	Cobra
PPO BLUE OPTIONS	FAMILY	\$2,106.16	\$526.54	\$263.27	\$287.20	\$300.88	\$526.54	\$1,579.62	\$2,148.28
	INDIVIDUAL	\$800.83	\$200.22	\$100.11	\$109.21	\$114.41	\$200.22	\$600.61	\$816.85
NETWORK BLUE OPTIONS	FAMILY	\$1,718.51	\$429.64	\$214.82	\$234.35	\$245.51	\$429.64	\$1,288.87	\$1,752.88
	INDIVIDUAL	\$653.43	\$163.36	\$81.68	\$89.11	\$93.35	\$163.36	\$490.07	\$666.50